

# PTA OF PS 372 Registration 2011/2012

## After School Program

Date of application: \_\_\_\_\_

Days Requested (please circle): M T W TH F

Date you want to begin After School: \_\_\_\_\_

### Tuition/Deposit

\$20/day (first child), \$15 (sibling). A deposit of your first months tuition is required at time of application, along with a \$30 registration fee.

Drop-in tuition is \$25/day and should be paid as it is used. A 48 hour notice via email is appreciated.

*\*Please note there is no After School on days when school is dismissed early or on school holidays.*

### Student Contact Information

Students Name: \_\_\_\_\_

Grade/Class: \_\_\_\_\_

Parent/Guardian 1: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

(print neatly!)

Parent/Guardian 2: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

(print neatly!)

### Emergency Contacts

Contact 1: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Contact 2: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

### Additional Individuals who may pick your child up from After School:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Medical Information:

List any physical problems, allergies or limitations your child may have:

*\*Additional form required if student has perscriptions for epipen or medication and must accompany the medication BEFORE they attend After School.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student's Doctor:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

*In case of an emergency and we are unable to contact you, do you authorize the After School program to determine what to do in the best interest of your child?*

Parent Signature: \_\_\_\_\_

E-mail all correspondence to: [asprogram@ps372.org](mailto:asprogram@ps372.org) or Janine DiLorenzo at: [janinedilo@gmail.com](mailto:janinedilo@gmail.com)

Send registration and payments through the backpack, place in AS mailbox or mail to: **After School Registrar, 512 Carroll Street, Brooklyn, NY 11215**